

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	2/1/01
FORMALTY REVIEW	JK	875	02/27/07
RESPONSE FORMALTY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected H _____ Non-elected
 o _____ Allowed I _____ Interference
 - (Through numeral) _____ Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date	Claim	Date	Claim	Date
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
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42		42		42	
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49		49		49	
50		50		50	

If more than 150 claims or 10 actions
staple additional sheet here

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